

**MECHANICAL PERMIT APPLICATION**

TYPE OR PRINT ALL INFORMATION

Date _____

- ☐ 1 FAMILY ☐ 2 FAMILY ☐ 3 FAMILY
☐ 4 OR MORE FAMILY RESIDENTIAL # OF DWELLING UNITS _____
☐ COMMERCIAL
☐ FOUNDATION UNDERGROUND ONLY
☐ MINOR LIMITED SCOPE OF WORK

- ☐ HVAC REGIST. # _____
☐ HEATING & COOLING
☐ BUILDING SERVICES PIPING
☐ VENTILATION / EXHAUST SYSTEMS
☐ FIREPLACE STOVE
- ☐ REFRIGERATION REGIST. # _____
☐ REFRIGERATION
☐ BUILDING SERVICES PIPING
☐ PLUMBING REGIST. # _____
☐ FUEL GAS PIPING ONLY
- ☐ HYDRONICS REGIST. # _____
 (STEAM & HOT WATER)
☐ HEATING & COOLING
☐ BUILDING SERVICES PIPING
- ☐ HIC-L # _____
☐ FIREPLACE / STOVE ONLY

AREA OF CONSTRUCTION _____ COST OF CONSTRUCTION _____ # OF STORIES _____
 ADDRESS OF JOB _____ ZIP _____
 WORKING IN UNIT#/SUITE/FLR _____ TAX DISTRICT/PARCEL _____
 SUBDIVISION/COMPLEX _____ BLDG/LOT# _____

APPLICANT: ☐ OWNER ☐ CONTRACTOR
 COMPLETE AFFIDAVIT FORM

PROPERTY OWNER OF RECORD _____ TELEPHONE () _____
 ADDRESS _____ CITY/STATE _____ ZIP _____
 EMAIL _____

ARE THERE ANY ACTIVE BUILDING SERVICES DIVISION VIOLATION ORDERS? ☐ YES ☐ NO
 ARE THERE ANY ACTIVE NEIGHBORHOOD SERVICES DIVISION VIOLATION ORDERS? ☐ YES ☐ NO

REGISTRATION # _____ TELEPHONE () _____
 CONTRACTOR _____ CITY/STATE _____ ZIP _____
 ADDRESS _____ EMAIL _____
 SIGNATURE OF CONTRACTOR OR AUTHORIZED SIGNER _____ PRINT OR TYPE NAME _____
 SOFT ACCOUNT #/Pin # _____ SOFT ACCOUNT AUTHORIZED SIGNATURE _____

BUILDING USE: _____

SCOPE OF WORK: _____

ALL FEES ARE NON-REFUNDABLE

APPLICATION # _____

City of Columbus, Department of Development, Building Services Division, 757 Carolyn Avenue, Columbus, Ohio 43224



LIST EACH TYPE OF UNIT(S) AND / OR SYSTEMS SEPERATELY.

USE ADDITIONAL SHEETS OF PAPER FOR CONTINUATION OF WORK IF NEEDED.

ADDITIONAL SHEETS OF PAPER ATTACHED? YES ☐ NO ☐**HEATING AND / OR COOLING**

Type of Unit	Total number of units	Total BTU	Total Tonnage	Total CFM	Total number of inlets/outlets

REFRIGERATION

Total number of Systems	Total Tonnage	Refrigerant Classification	Total Number of Evaporators

BUILDING SERVICES PIPING

Type of Piping System	Total Number of Connections	Piping Material

VENTILATION / EXHAUST SYSTEMS

Type of System	Total Number of Systems	Total CFM	Total Number of Inlets / Outlets

FIREPLACE / STOVE

Type of Unit	Total Number of Units	Type of Fuel or Energy Source

Footnotes:

- Building Services Piping – For the Mechanical Permit Application would include, but not limited to, refrigeration, chilled water, condenser and cooling tower water, brine, and water / antifreeze systems; steam, steam condensate, and hot water piping systems; fuel oil piping and fuel gas piping for heating, cooling, and cooking applications.
- Type of unit or system – Identify the appliance, equipment, component part (i.e: vent, damper), etc. List each different type separately.

OFFICE USE ONLY

Total Fee _____ Receipt # _____

If you have any questions regarding this form, please call: (614) 645-3270. **Incomplete information may result in rejection of application submittal.**



HOMEOWNER PERMIT AFFIDAVIT

FOR SINGLE-FAMILY

State of Ohio, County of Franklin, SS

Date _____

I, _____, do certify that I am, or will be, the occupying homeowner of a single-family residence of an R-4 Use Group, and do hereby submit application to undertake the following work located at:

ADDRESS _____ CITY _____ STATE _____ ZIP _____

I WILL BE DOING THE FOLLOWING WORK: Please check all that apply. Separate permits shall be obtained for each item marked. For each item checked, provide information on who will perform the actual work on the line provided.

WORK WILL BE DONE BY:

☐ Structural☐ Electrical☐ Heating☐ Refrigeration/Air Conditioning☐ Plumbing

I UNDERSTAND AND WILL ABIDE BY THE FOLLOWING STATEMENTS:

- I live in this residence with my family ☐ YES ☐ NO
OR - I will move into this residence with my own family on or before (date) _____
- I will only use this dwelling as the home for me and my family.
- I will not enter into a contract with an unlicensed contractor and I will do the work as required by the Columbus City Codes. It is understood that I may have assistance from other persons not licensed as contractors with the City of Columbus, providing no contract either verbal or written exists among the parties involved.
- I have attached the permit application and the proper fee. I know that I am responsible for the work meeting Columbus City Codes. I know that work done by someone other than myself requires permits by licensed contractors. I have told the truth on this affidavit and on the attached papers. I know there is a fine or imprisonment for violating the building code.

SPECIAL NOTE: Based on the licensing requirements of the City of Columbus, a homeowner may NOT obtain mechanical permits for new construction of a single family residence.

NAME OF APPLICANT - PLEASE PRINT

SIGNATURE OF APPLICANT

ADDRESS OF APPLICANT

(AREA CODE) HOME PHONE

(AREA CODE) ALTERNATE PHONE ☐ WORK ☐ MOBILE ☐ OTHER

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Notary Seal Here

NOTARY PUBLIC OR BUILDING AND DEVELOPMENT SERVICES OFFICIAL

FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE OHIO REVISED CODE, SECTION 2921.13(A)(3), A MISDEMEANOR OF THE FIRST DEGREE, PUNISHABLE BY UP TO SIX (6) MONTHS IMPRISONMENT AND A FINE OF \$1,000 OR BOTH.

OFFICE USE ONLY

☐ Approved☐ Denied By _____

Date _____

Comments _____

PHONE FOR INSPECTIONS: Structural 645-8235, Electrical 645-8265, Heating 645-8138, Refrigeration A/C 645-8138, Plumbing 645-8355
FOR MORE INFO CONTACT THE SENIOR INSPECTOR: Structural 645-6371, Electrical 645-6076, Heating, Refrigeration, A/C 645-3270, Plumbing 645-6340